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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

(a) Name of Individual, Organization or Corporation	7		
LIVING UNITED FOR CHANGE IN ARIZONA			
(b) Address (number and street) check if different than previously reported 5716 N 19TH AVE			
(c) City, State and ZIP Code	3. FEC Identification Number		
PHOENIX AZ 85015	3. I LO Identification Number		
Occupation and Name of Employer (for Individual Filers Only)	C C90018169		
2. Goodpation and Name of Employer (for individual File of Only)			
4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report b) Is this Report an amendment? FROM THROUGH THROUGH April 15 Quarterly Report 48-Hour Report 48-Hour Report 48-Hour Report 48-Hour Report			
6. TOTAL CONTRIBUTIONS	.00		
7. TOTAL INDEPENDENT EXPENDITURES	40309.00		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation of, any candidate or authorized committee or agent of either, or any political party committee or its agent.	n, or concert with, or at the request or suggestion		
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE ectronically Filed]		
Sutherland, Shantal, , , Sutherland, Shantal, , ,	11/01/2022		
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to	o the penalties of 2 U.S.C. §437g.		

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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AME OF FILER (In Full) LIVING UNITED FOR CHANGE IN ARIZONA							
Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination			
ADP Payroll				м = м 10	/ D D /	2022	
Mailing Address 111 Rio Salado Pkwy					O.	EULL	
City	State	Zip Code		A	mount		
Tempe	AZ	85281			Transact:	on ID - EE7 000	10309.00
Purpose of Expenditure		Category/			Sought:	on ID : F57.000 House	State: AZ
Canvassing (Estimate)		Type	001		Ü	X Senate	District:
Name of Federal Candidate Supported or Opposed by Expenditure: Kelly, Mark, , ,			Check	One:	President Support	Oppose	
Calendar Year-To-Date Per Election for Office Sought		13854	6.55	Disburs	ement Fo 2022 Other (x General
Full Name (Last, First, Middle Initial) of Payer)			С	ate of Pu	blic Distribution	/Dissemination
FieldCorps LLC					M M M	/ D D /	2022
Mailing Address 49 S Sycamore Ste 3-4				Д	mount	النبا ا	
City	State	Zip Code					30000.00
Phoenix	AZ	85202		1	Fransaction	on ID : F57.000	
Purpose of Expenditure Canvassing (Estimate)		Category/ Type	001	Office	Sought:	House Senate	State: AZ
Name of Federal Candidate Supported or Opposed by Expenditure: Kelly, Mark, , ,		Check	One:	President Support	District:		
Calendar Year-To-Date Per Election for Office Sought			Disburs	Disbursement For: Primary 2022 Other (specify)			
Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination			
Mailing Address			M M / D D / Y Y Y Y				
Walling Address				Δ	mount		
City	State	Zip Code				7 1 1 7	
Purpose of Expenditure		Category/		Office S	Souaht:	House	State:
,		Type		50 (-	Senate	District:
Name of Federal Candidate Supported or Op	posed by Expend	liture:				President	
				Check	One:	Support	Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General Other (specify)					
(a) SUBTOTAL of Itemized Independent Exper	nditures			>	1 1 1		40309.00
(b) SUBTOTAL of Unitemized Independent Ex	penditures			··· •			
(c) TOTAL Independent Expenditures(carry total from last page forward to				▶			40309.00